



Montgomery County Government
Department of Health and Human Services

Annual Report

FISCAL YEAR 2010



Building A Healthy, Safe And Strong Community – One Person At A Time

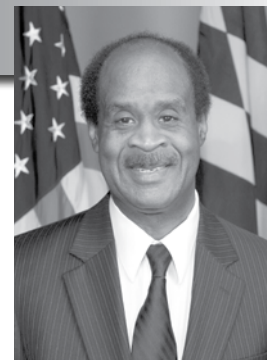
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Message from the County Executive



I am pleased to present the FY2010 Annual Report for the Montgomery County Department of Health and Human Services. Our community has continued to see an increase in the number of residents affected by current economic conditions. The Department and its staff have continued to respond in a committed, compassionate manner to help those most vulnerable. Even in these uncertain economic times, I have strived to maintain a safety net of services for those in the community who are most at need.

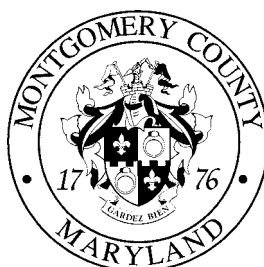
As the largest department in County government, the Department continues to provide important services to those most vulnerable. Demand for services has been on the increase for the past several years and that will continue to increase for the foreseeable future.

I am grateful to all the staff of the Department of Health and Human Services as they remain committed to providing these services to more and more in our community. The work they perform not only helps individuals and families achieve a better chance for health and success, but it also improves and strengthens the quality of life in Montgomery County.

Sincerely,

A handwritten signature in black ink that reads "Isiah Leggett". The signature is fluid and cursive, with the first name "Isiah" and last name "Leggett" clearly distinguishable.

Isiah Leggett
County Executive



Message from the Director



I am proud to present the Montgomery County Department of Health and Human Services Annual Report for Fiscal Year 2010.

We have continued to see an unprecedented growth in applications and consumer need for health and human services, a decline in our resources and a continuous struggle to match needs and services. Our staff worked harder and smarter than ever. I want to express my gratitude for all the staff and partners of the Department that made it possible for us to continue to serve our residents with commitment and caring.

After three years of experiencing continuous reductions and unprecedented growth in caseload, we are at a decision point. We are at a moment when we need to revisit our current business model and determine how we will adjust to the new business environment of fewer resources and increased need. For us the answer lies in technology and increasing efficiencies to support our business need.

In FY10, as in previous years, we are providing direct services but also the Department has become more data and outcomes driven, engaged more actively in the County master planning process, conducted more qualitative reviews including the Quality Service Reviews and Community Reviews to evaluate our client and system outcomes and actively participated in CountyStat. To better serve residents most impacted by economic conditions, the Neighborhood Opportunity Network created three neighborhood service sites in partnership with leading non profits that use a community organizing approach to alert residents of services available in their neighborhood. Procurement reform continues to make slow but steady progress and the County's Enterprise Resource Planning (ERP) implementation has consumed much of our time and energy. In health care and in human services, our efforts to provide caring and committed services were in evidence throughout the year.

This year also saw an amazing mobilization of advocacy and commitment on the part of all policy leaders to preserve the safety net. I want to express our particular gratitude to the County Executive for his leadership, my other colleagues in County Government and our many friends in County Council, our contract partners and our advocates who supported our efforts to preserve our efforts to serve the most vulnerable in our County.

Warmly,

A handwritten signature in cursive script that reads "Uma S. Ahluwalia".

Uma S. Ahluwalia
Director



*Building a Healthy, Safe and Strong Community—
-One Person At A Time*

Office of the Director

Uma S. Ahluwalia, *Director*



This office includes:

- Policy Oversight & Integration
- Intergovernmental Relations and Legislative Coordination
- Planning, Accountability and Customer Service
- Public Information

Highlights

- Service integration efforts continued with support from Casey Family Programs. We developed a practice model, deepened our thinking around integrating services, tested our intake and screening tool and institutionalized our Quality Service Review protocol and strengthened our practice around integrated service delivery.
- We continued to make our case for an integrated IT system and identified areas such as digitizing records and integrated eligibility as solutions to pursue. We continued to make our business case to modernize our Information Technology Systems.
- Continued our work on equity and with support from our consultants hosted several focus groups and community forums to gather data to inform our work.
- The Department continued to work on improvements in vendor contracting and invoice processing activities, especially with implementation of ERP countywide.
- Continued to focus on our efforts with our non-profit partners to strengthen our safety net and improve access to care.



Planning, Accountability and Customer Service

JoAnne Calderone, Manager



The Department's qualitative review process that uses an intensive case review protocol to assess indicators of client status and system performance matured this year. Follow-up work will focus on acknowledgement of good system performance and development of Performance Improvement Plans where the system needs improvement. The Department continued to leverage American Recovery and Reinvestment Act (ARRA) funding to support County funds in providing services to individuals and families.

This unit includes:

- Performance Measurement and Planning
- Information and Referral Telephone Line
- Grants Resource and Acquisition Unit

Highlights

Performance Management and Planning

- Conducted eight rounds of the Department's qualitative evaluation process, Quality Service Reviews (QSR), covering a total of 44 cases. Thirty-three DHHS staff served as reviewers, including nine new trainees in Fiscal Year 2010 (FY10). Building internal reviewer capacity ensured an adequate number of in-house reviewers without having to rely on external consultants in lean budget times.
- Chartered and convened a cross-cutting QSR Advisory Committee to help guide QSR implementation and planning and to prioritize recommendations for system-wide improvements based on QSR findings.
- Prepared and implemented a detailed plan for QSR follow-up activities that identifies relevant parties, timing, frequency and accountability for each of 10 steps. It includes an online survey for program managers and supervisors to document whether and how QSR results were used to improve clients' well-being and address systemic challenges.
- Continued to work with the Maryland National Park and Planning Commission through the review process to encourage consideration of health and social indicators in the land use planning process.
- Finalized a conceptual case practice model for integrated service delivery that recognizes when a client has several health or human services needs, these needs are often interrelated and complex. Addressing these needs in a collaborative, coordinated way may lead to better outcomes for the client and ultimately for the staff, furthering our shared goals of safety, health and self-sufficiency.
- Conducted evaluative reviews of five programs using trained reviewers from the community and five reviews by University of Maryland public policy graduate students to determine program strengths and areas of recommended improvement.

Stats

Performance Measurement

The Quality Service Review (QSR) looks at how well a client is doing and how well the system is performing to serve the client. Throughout the year, cases involving multiple and diverse services were reviewed. Review results are used to improve case practice that leads to better client outcomes.

Quality Service Review (QSR)

No. Cases Reviewed	44
Percent Cases Showing Beneficial Impact from HHS Services	98

Grants

The Grants and Resource Acquisition Unit supports internal programs and community partners to accomplish the Department's vision of a safe, healthy and self-sufficient community through acquiring grants to support health and human services not funded by county, state or federal resources.

- American Recovery and Reinvestment Act (ARRA) direct funding to DHHS of \$5,594,115 supported services including immunizations, youth violence prevention, emergency food supplies, domestic violence victim assistance, poverty prevention and early intervention services for infants and toddlers at risk.
- Funding from federal, state and foundations totaled \$1,810,306 in support of cancer screening and prevention, youth violence prevention, community health and emergency preparedness.
- An additional \$3,714,472 in grants to partners supported youth violence prevention, domestic violence prevention, H1N1 community outreach, mental health services and transitional housing for victims of domestic violence.

Grant Awards to DHHS and Partners FY06-FY10

	FY06	FY07	FY08	FY09	FY10
Grants to DHHS Directly	\$1,360,737	\$5,271,289	\$698,277	\$2,271,061	\$7,404,421
Grants to DHHS Partners	\$302,280	\$7,857,073	\$10,933,395	\$2,378,045	\$3,714,472
Total Grants Received	\$1,663,017	\$13,128,362	\$11,631,672	\$4,649,106	\$11,118,893

Office of the Chief Operating Officer

Sherry D. White, Chief Operating Officer

The staff of the Office of the Chief Operating Officer is fully engaged in the Department's work of continuous improvement of administrative processes. Working collaboratively with service area staff we are committed to strengthening our capacities in an environment of transparency and accountability.

This Service Area includes:

- Budget
- Fiscal Management
- Cost Allocation and Claiming
- Contract Management
- Logistics and Facilities Support
- Human Resources
- Information Technology and Compliance (ADA and HIPAA)

Highlights

- Provided substantial support for the implementation of the County's new Enterprise Planning Resource (ERP) project.
- Provided support to Department ERP users to resolve issues related to ERP financial modules. Served as the primary liaison with the ERP financial team to address the needs of Department users.
- Implemented a substantial portion of the J.D. Edwards phase-out project.
- Introduced an automated random moment time study process to replace the previous manual process.
- Introduced an automated cost allocation plan calculation program to streamline the development of and improve the accuracy of federal financial participation (FFP) claims.
- Sixty-nine new employees attended the DHHS new employee orientation. Eighty four percent of the attendees rated the orientation as very good/excellent. Eighty seven percent reported that the employee orientation better prepared them for their new position and 81 percent reported that they received adequate training during their first several weeks on the job.
- Forty-two employees responded to exit interviews. Out of the 42 employees, 60 percent said retirement was the reason for leaving the Department, 81 percent reported that their Service Area was above expectations/outstanding and 90 percent of the respondents reported that they would recommend working at DHHS to others.
- In FY 10, the Contract Management Team (CMT) completed the following actions:
 - Prepared more than 140 new contracts
 - Completed 490 year end actions in coordination with Fiscal Team.
 - Processed 17 solicitations, including 10 request for proposals (RFP)
 - Created a new Intranet site for Financial Operations and the CMT
 - As part of the implementation of the Contract Monitoring strategic plan, CMT assisted or presented at monitor training sessions.



Office of Community Affairs

Betty Lam, Chief



The mission of the Office of Community Affairs and its programs support expanding access, improving quality of services, increasing individuals/families' independence and reducing health disparities. We accomplished that mission through providing education, outreach, system navigation assistance, effective referrals, language services, cultural competency training and advocacy.

This Service Area includes:

- Community Action Agency
- Head Start
- TESS Center
- Outreach and Language Access
- Minority Health programs

Highlights

- Provided Head Start services to 648 children ages three to five. Sixty-eight percent of the students enrolled in Head Start have demonstrated “full readiness” for kindergarten.
- For tax year 2009 (FY2010), the Community Action Agency expanded its Volunteer Income Tax Assistance (VITA) services with federal stimulus funding and helped return \$8,292,236 million* to 2,749 households (*includes federal and state refunds and EITC). It is estimated the program saved families \$802,708 in tax preparation fees. The program benefited from 3,364 volunteer hours.
- A six-month financial education pilot funded by the American Recovery and Reinvestment Act (ARRA) linked DHHS customers receiving emergency services and income supports with workshops: 278 customers attended 43 workshops in *Credit, Budgeting; Savings and Banking; Identify Theft; Bankruptcy Prevention and Taxes*. Sixty nine customers with complex needs were referred by DHHS to receive intensive financial consultation. Six hundred seventy five individuals received brief, “drop-in” counseling at DHHS and partner facilities.
- The African American Health Program successfully obtained accreditation by the American Association of Diabetes Educators for the Diabetes Self Management Education Classes, which has educated over 1000 diabetic and pre-diabetic residents and their families or caregivers since 2003.
- The Asian American Health Initiative’s health promoters provided 1465 educational encounters, 669 basic health screenings and made 102 referrals to different health services.
- DHHS continued to remove language barriers to service by providing language assistance during 49,024 service encounters with staff. Most of these encounters were served by DHHS’ own bilingual staff persons. Through the minority health programs, 5800 medical interpretations were provided to patients who were seeking care at the safety net clinics.
- Expanded the coverage of the Suburban Maryland Welcome Back Center to include the provision of services to medical doctors and allied health professionals, as well as achieved ethnic diversification of clients served to include individuals from Latin America (58 percent), Africa (28 percent), Asia (9 percent), and Europe (5 percent).
- The Takoma East Silver Spring (TESS) Center served 8400 walk-in clients. The majority of the clients applied for food and medical services or received referrals to community based services.

Stats

- The Latino Health Initiative asthma program provided education to 168 parents/caregivers. The parents and caregivers reported an increase in their ability to manage their child's asthma, a decrease in emergency department visits and a decrease in hospitalizations.
- The Head Start program is a comprehensive program to prepare low-income young children, ages 3 to 5, for success in school. Children were served in 27 schools and two child care centers. The performance of children who completed the program is measured annually using Maryland State Department of Education definitions of kindergarten readiness. Full readiness is defined as consistently demonstrating skills, behaviors, and abilities needed to meet kindergarten expectations successfully.

Head Start Services	Total Served	Total Served	Total Served
	FY2008	FY2009	FY2010
Funded Enrollment	648	648	648
Wrap Around Child Care Services/ Before and After "School"	43	0	0
Percentage of Head Start students who demonstrate "full readiness" upon entering Kindergarten	67%	68%	68%

Trends/Issues

- During this continued recession, despite a thirst for financial education and counseling services, there remains a lack of financial education capacity, combined with inadequate financial education knowledge among public and nonprofit social services providers.
- Federally legislated ARRA-funded tax related increases (funded through Tax Year 2010, or FY11) have yielded significant income supports to the County's low-to moderate income population, with the State EITC and local EITC (Working Families Income Supplement, or WFIS) providing resources to stabilize families and the local economy. If either the federal or state EITC levels are reduced, the FY11 reduction of the County's WFIS to 67 percent will magnify the economic fragility of working families and increase the number living below or close to poverty.
- Continued escalating numbers of eligible applicants for Head Start for FY2011 due to continued economic factors that have increased the number of families below the federal poverty level.

Aging and Disability Services

John J. Kenney, Chief



The economic downturn of the past year has posed serious challenges to the residents served by Aging & Disability Services. Seniors and individuals with disabilities on fixed incomes have had to make difficult lifestyle changes including changes in place of residence and a return to full or part-time employment if available. I commend the staff, volunteers and our private sector partners who have assisted older adults, individuals with disabilities and their family caregivers to live with dignity, independence and safety as full members of our community.

This Service Area includes:

- Community Support Network for People with Disabilities
- Adult Protective Services and Case Management
- Aging & Disability Resource Unit
- Home Care Services
- Respite Care
- Senior Nutrition,
- Long Term Care Ombudsman
- Senior Community Services

Highlights

- Enhanced our capacity to assist individuals to move from institutional settings to the community by implementing the Money Follows the Person (MFP) initiative. In Fiscal Year 2010, 706 individuals were referred for program education under MFP, with 62 applications completed.
- Continued to provide leadership to the countywide Senior Sub-Cabinet process, which is working to address the needs of the growing older adult population. Staff with Aging & Disability Services participated in each of the eight workgroups, including being co-chairs of two groups.
- Received awards and recognition for outstanding service. The Better Living at Home program was one of only 13 programs awarded the national Innovations in Aging award, in addition to a National Association of Counties (NACo) award. Community Service Network (CSN) received a NACo achievement award for "Time for Tea", an innovative program that helps educate parents of small children ages birth to seven with severe disabilities about how to help with the daily tasks of caring for their child. The Ombudsman program was also recognized, with staff member Eileen Bennett receiving the national 2010 Howard Hinds Memorial Advocacy Award, and volunteer Hilda Woel receiving an "Older Volunteer Enrich American Award" from the National Association of Area Agencies on Aging.
- Strived to continue to provide high quality services despite reductions in funding, and increased need in the population. Waiting lists for services continue to grow: Developmental Disabilities Administration (DDA) wait list: 2,456; Older Adult Medicaid Waiver: 1,632; Respite Care: 1,291; Autism Waiver: 640; Social Services to Adults: 152; Home Care: 43; Senior Care: 37.

Statistics

Adult Protective Services

Of the cases investigated, 65 percent involved self-neglect, 14 percent neglect by caregivers/others, 12 percent financial exploitation and 8 percent physical abuse. Of the cases investigated, 71 percent involved persons age 65 or older.

Total Number of Adult Protective Service Investigations

FY07	FY08	FY09	FY10
541	580	706	667

Senior Nutrition Program

The number of individuals, and meals served was greatly enhanced due to one-time only infusion of Federal American Recovery and Reinvestment Act (ARRA) funding. In FY2010, more than 68 percent of all individuals served in the congregate meal program were from immigrant communities.

	FY05	FY06	FY07	FY08	FY09	FY10
Number unduplicated clients	4,998	5,256	5,464	5,334	5,531	6,826
Number congregate	219,450	220,061	267,889	261,201	261,905	294,914
Number home-delivered meals	71,287	76,138	73,873	69,562	72,289	161,716

Respite Care

Number of people served was relatively the same (2 percent decline) but the number of hours of respite provided dropped by 13.3 percent. At the same time, the waiting list increased from 428 to 1291 (302 percent increase).

	FY05	FY06	FY07	FY08	FY09	FY10
Number Served	1,493	1,406	1,352	1,276	1,535	1,505
Hours of Respite	56,890	56,269	54,507	55,324	56,330	48,851

Developmental Disability (DD) Supplement

A total of 2,475 individuals (a decrease of 12.8 percent since FY2008) with developmental disabilities received services that were supplemented by the County. Services include supported employment, vocational training, day programs, individual and family support services and residential placements. Ninety-four percent of customers were able to remain at the same or higher level of independence, and 93 percent reported satisfaction with services.

	FY05	FY06	FY07	FY08	FY09	FY10
Number served	2,375	2,472	2,772	2,838	2,631	2,475

Trends/Issues

- Aging of the population, combined with the economic downturn, is anticipated to lead to growing demand for services at a time when funding for service is declining.
- Prevalence of diagnosed cases of individuals with autism spectrum disorders has been increasingly sharply for over a decade. In FY2009, Montgomery County Public Schools reported that 1 in every 110 students had an autism spectrum disorder (38 percent increase since FY2007). These figures are anticipated to continue to increase, leading to a growth in demand for services.

Behavioral Health and Crisis Services

Raymond L. Crowel, Chief



Despite the significant budget cuts over the past two years, BHCS programs have continued to provide services to county residents across the lifespan. Both private providers and County-run programs have collectively worked to improve service integration and cross systems collaboration. The continuing economic challenges faced by the nation have resulted in increases in the numbers of adults, children and families needing our services. Throughout the year we continued to focus on maintaining the quality of services and ensuring that consumer satisfaction remains high; and although we will face some hard choices in the coming year, we will continue to work towards a stronger and improved system of care that will ensure access to culturally appropriate and effective services to those in need.

This service area includes:

- 24 hour Crisis Services
- Behavioral Health Planning & Management
- Behavioral Health Community Support Services
- Behavioral Health Specialty Services
- Child, Adolescent and Senior Mental Health Services
- Criminal Justice/Behavioral Health Services
- Victim Assistance and Sexual Assault Program

Highlights

Service Delivery

- The Access program connected over 2000 individuals to Public Mental Health Services (PMHS) in Fiscal Year 2010 (FY10).
- The Project for Assistance in Transition from Homelessness (PATH) provided outreach to 460 homeless individuals in the community and the Montgomery County Correctional Facility.
- Twenty seven Residential Treatment Center (RTC) diversions were overseen and 48 RTC placements were made through the Behavioral Health Planning and Management (BHPM).
- The Clinical Assessment and Triage (CATS) program conducted over 9000 screenings on individuals arrested in 2010, and almost 200 suicide assessments.
- The Outpatient Addictions Services Adult Drug Court Treatment Program continued to provide services to over 100 offenders per year.
- The Criminal Justice Behavioral Health Program and the Behavioral Access to Care Program provided (88) 8-505 evaluations and (20) 8-507 treatment placements in FY10.

Collaboration and System Integration

- The Abused Persons Program (APP) has served almost 2,000 persons since the opening of the Family Justice Center.
- The on-going use of the Lethality Assessment Protocol (LAP) by all of the police departments, the Office of the Sheriff, and DHHS, contributed to there being no domestic (DV) homicides during FY10.
- Senior Mental Health provided over 90 consultations to DHHS Aging & Disability & mental health providers.
- BHCS implemented a SSI/SSDI Outreach, Access, and Recovery (SOAR) workgroup and sponsored training on the SOAR application process.

Capacity Building

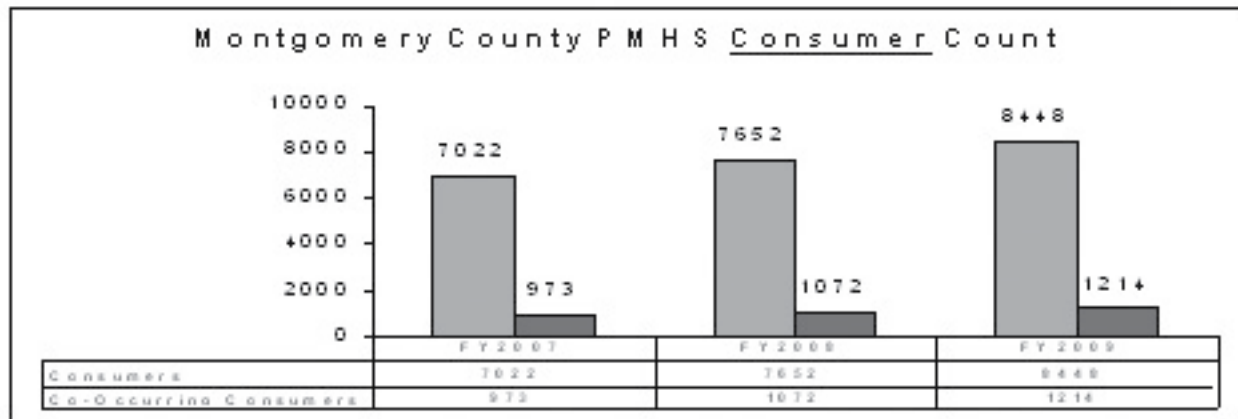
- The Crisis Center was approved for licensure as an outpatient mental health clinic by the Office of Healthcare Quality.
- The Assertive Community Treatment (ACT) Team, People Encouraging People, Inc. (PEP) passed their fidelity review, and continued to operate at maximum capacity.
- The BHPM via its Veterans Collaborative, partnered with the Maryland's Commitment to Veterans to train and certify 90 clinicians on combat PTSD, traumatic brain injury, military culture and readjustment issues.
- The BHPM Office of Consumer Affairs, partnering with Maryland Consumer Leadership Coalition (MCLC); the Mental Hygiene Administration; and Johns Hopkins University Sars Levitan Institute for Policy Studies, sponsored a two day training in May 2010 for Peer Employment Resource Specialists (PERS).

Monitoring and Evaluation

- BHCS analyzed and aggregated outcome measure survey results to evaluate the effectiveness of treatment and intervention practices in outpatient mental health clinics.
- BHPM developed a Residential Rehabilitation Program (RRP) survey for residents who have lived in the RRP for two or more years to identify residents who want to move out of RRP and identify the barriers to moving. One hundred sixty nine consumers were surveyed.
- BHPM conducted a total of 460 residential inspections for residential rehabilitation programs, therapeutic group homes, mental health assisted living facility and transitional shelter beds.
- BHCS conducted 362 psychiatric evaluations of students referred by the public schools, and 95.6 percent of those students were stabilized in the community without utilizing hospital emergency departments or hospitalization.

Trends/Data

Data continues to reflect an increase in access and utilization of services since FY 2008.



* Consumer coverage can transition during year; Source: MAPS-MD Data Report MARF00004 - Based on Claims through August 31, 2009.

* 24.8 percent increase in co-occurring consumers since FY 07

Behavioral Health Community Support Services

Consumers Served/Level 1 Outpatient Addictions Treatment

	FY07	FY08	FY09	FY10
Total Consumer County	525	734	571	761
Percentage of decrease in substance abuse for patients completing treatment	84%	74%	86%	87%

Children, Youth and Family Services

Kate Garvey, Chief



This was another challenging year as we continued to see tremendous demands for services while we experienced ongoing reductions in resources. Families and individuals worked extremely hard to overcome many barriers. Staff worked tirelessly, using all the tools and creativity they could muster to find solutions with families. Our many partners, both public and private, continued to deliver high quality services and supports even while their resources dwindled. I am thankful for our ability to work together to strive to assure the safety, well-being and health of the residents of our County. It is gratifying to see what can be accomplished even during the most difficult times.

This Service Area Includes:

- Child and Adolescent School and Community Based Services
- Child Care Subsidies
- Child Welfare Services
- Conservation Corps
- Early Childhood Services
- Income Supports
- Infants and Toddlers Program
- Linkages to Learning
- Juvenile Justice Services
- Parent Support Services
- Positive Youth Development

Highlights

Child Welfare has been instituting family centered practices which focus on the full engagement of family members to offer support and more natural options for children who have come in contact with the child welfare system. This approach includes Family Involvement Meetings (FIM), which encourages families to bring important people in the family's life together to address the issues facing the family. In addition, there is a strong effort for Family Finding, which is a structured program that helps youth in the foster care system make life long connections with family members. These activities have led to a reduction in out of home placements for children and an increase in children living with family members.

Linkages to Learning was selected as one of only eight "innovative and exemplary children's initiatives" across the country to participate in the Children's Outcomes Project, co-sponsored by the Nemours Foundation and the California Health Endowment. This project brings participants together to identify the promising policies and practices related to cross-sector initiatives that address the health and developmental needs of children.

The **Infants and Toddlers Program** was able to expand their services to eligible children over the age of three with American Recovery and Reinvestment Act (ARRA) funding.

The **Street Outreach Network** has served a total of 320 youth since its inception in 2008.

Income Supports saw another record year of increases in application volume and caseloads. With financial support from the State for overtime funds, the compliance rates reached 96 percent in Temporary Cash Assistance, Food Supplement, Medical Assistance for Families and Children programs and the Children's Health program.

Trends/Issues

The number of children who are involved with the Child Welfare system who are now living with relatives continues to grow and there was a 30 percent increase in the past year of relatives who obtained custody and guardianship through the courts.

Sixty seven percent of Linkages to Learning clients who exited mental health services in Fiscal Year 2010 demonstrated improved behavior in school.

One hundred parents of gang involved youth were engaged by the Positive Youth Development Family Intervention Specialist.

More than 163,000 Early Childhood services were provided to young children, their families and caregivers through DHHS, MCPS and non-profit community-based partners.

Customers seeking income support benefits continue to use different models of applying for benefits including telephone interviews, online applications, using DHHS extended hour's services and access services through the three Neighborhood Opportunity Network sites. Nearly 5,000 customers were seen at the Neighborhood Opportunity Network sites. Of the 1,095 customers who used the extended Tuesday night services, 51 percent worked during the day and did not have to miss time from their jobs to apply for services.

Stats

During Fiscal Year 2010 there was a 32 percent decrease in new out of home placements in Child Welfare Services compared to last year.

Linkages to Learning served 5,472 students and family members via formal mental health and social services – a 10 percent increase over FY09.

The percentage of Montgomery County kindergarteners assessed as “fully ready” increased to 76 percent (49 percent in 2001).

The Screening and Assessment Services for Children and Adolescents Program (SASCA) completed 1,576 youth assessments and 1,435 youth were referred for services.

Income Support Program Increases	FY08	FY09	FY10
Temporary Cash Assistance	1,013	964	1,037
Food Supplement Program	11,383	15,766	19,268

Child Care Subsidy Program Increases	FY09	FY10	% Increase/Decrease FY10 to FY09
Intake/Applications average per month	356	386	8%
Open Cases average per month	1567	1861	19%
Number of Children Paid average per month	1882	2034	8%

Public Health Services

Ulder J. Tillman, MD, MPH, *Public Health Officer*



Public Health Services coordinated a community-wide response to contain the spread of H1N1 flu (swine flu). Staff administered 35,000 doses of H1N1 vaccine to residents. We successfully passed this test of our County's preparedness and capacity to respond to a significant public health emergency. The effort succeeded due to exceptional collaboration among countless public and private partners such as MCPS, the media, the medical community and leadership at the local, regional, state and federal health levels.

Due to the need to tighten the budget we regretfully had to disperse health promotion and prevention activities and abolish several filled and vacant positions. We were able to maintain most services, reduce the TB Program's waiting list for preventive treatment and add an STD satellite clinic in Germantown. Our Montgomery Cares program and its network of eleven community based clinics served a record 26,000 residents in need of affordable health care.

This Service Area includes:

- Cancer Screening Programs
- Communicable Diseases & Epidemiology
- Community Health Services
- Emergency Preparedness
- Health Care for the Uninsured
- Eligibility Screening for Health Services
- Licensure & Regulatory Services
- School Health Services

Highlights

- Provided reproductive health services for 4,955 young women, including 1,338 teens through contractual relationships with three clinical providers.
- Screened 1,800 County women for breast cancer in the Women's Cancer Control Program providing mammograms, breast exams, pelvic exams and pap smears through contracts with medical providers. Women with abnormal results are case managed for further diagnosis and linked with the state's program for treatment.
- Launched a new online appointment system for flu and other vaccine clinics to significantly shorten lines and wait time for residents getting immunized. Public Health Services and Department of Technology Services developed this in response to lessons learned during the H1N1 flu clinics.
- Successfully reduced the TB Program's waiting list for preventive treatment from a high of 650 to 299. Staff is taking all steps to further reduce the list in order to address the high TB rate in the County. Montgomery County has the highest rate of TB in Maryland with 7.2 cases/ 100,000 population compared to the State's rate of 3.8 per 100,000.

- The Fetal & Infant Mortality Review Board and Minority Infant Mortality Reduction Pilot sponsored “Reducing the African-American Infant Mortality Disparity: A Symposium of What Works” to lower the high infant mortality rate among the County’s African American residents. The rolling average annual infant mortality for African Americans (13.25 per 1000 live births) between 2006 and 2008 was more than three times higher than that of Whites (4 per 1000 live births).

Statistics

Number of Individuals Served by Montgomery County Health Care Access Programs

	FY09	FY10
Montgomery Cares	21,077	26,268
Maternity Partnership	2,375	1,999
Care for Kids	3,600	3,366

- Provided primary care, medications and specialty care for 26,268 uninsured adults through the Montgomery Cares Program and its network of 11 community based clinics, hospital partners and the Primary Care Coalition. This represents a 25 percent increase in individuals served over last year.
- Provided prenatal and postpartum services through the Maternity Partnership Program for 1,999 women to ensure healthy birth outcomes. Clinical services are provided through Holy Cross, Washington Adventist and Shady Grove Adventist Hospitals. Low birth weight babies (under 2,500 grams/5.8 pounds) are at increased risk of experiencing serious health problems. More than 94 percent of newborns born to mothers enrolled in this program have a healthy birth weight.
- Served 3,366 uninsured, low income children with access to a primary health care provider, prescriptions and limited specialty care through the Care for Kids Program.

Trends/Issues

- Continued a multi-year plan to open additional School Based Health - Wellness Centers. Currently, six schools have these full service primary care clinics located within the school buildings. The department is exploring several avenues, grants and partnerships to position the centers to benefit from federal health reform changes and funding streams, and to reduce costs and broaden service benefits. Construction is in process at a seventh elementary school and plans are in place for further expansion at the elementary and secondary level.

Special Needs Housing

Nadim A. Khan, *Chief*



The mission of Special Needs Housing (SNH) is to lead the County's efforts to develop accessible, affordable and innovative housing models to serve special needs and homeless populations. We collaborate with public and private agencies to develop and implement strategies to prevent homelessness.

This Service Area includes:

- Energy Assistance Program
- Homeless Prevention
- Individual & Family Shelter Services
- Rental Assistance Program
- Supportive Housing

Highlights

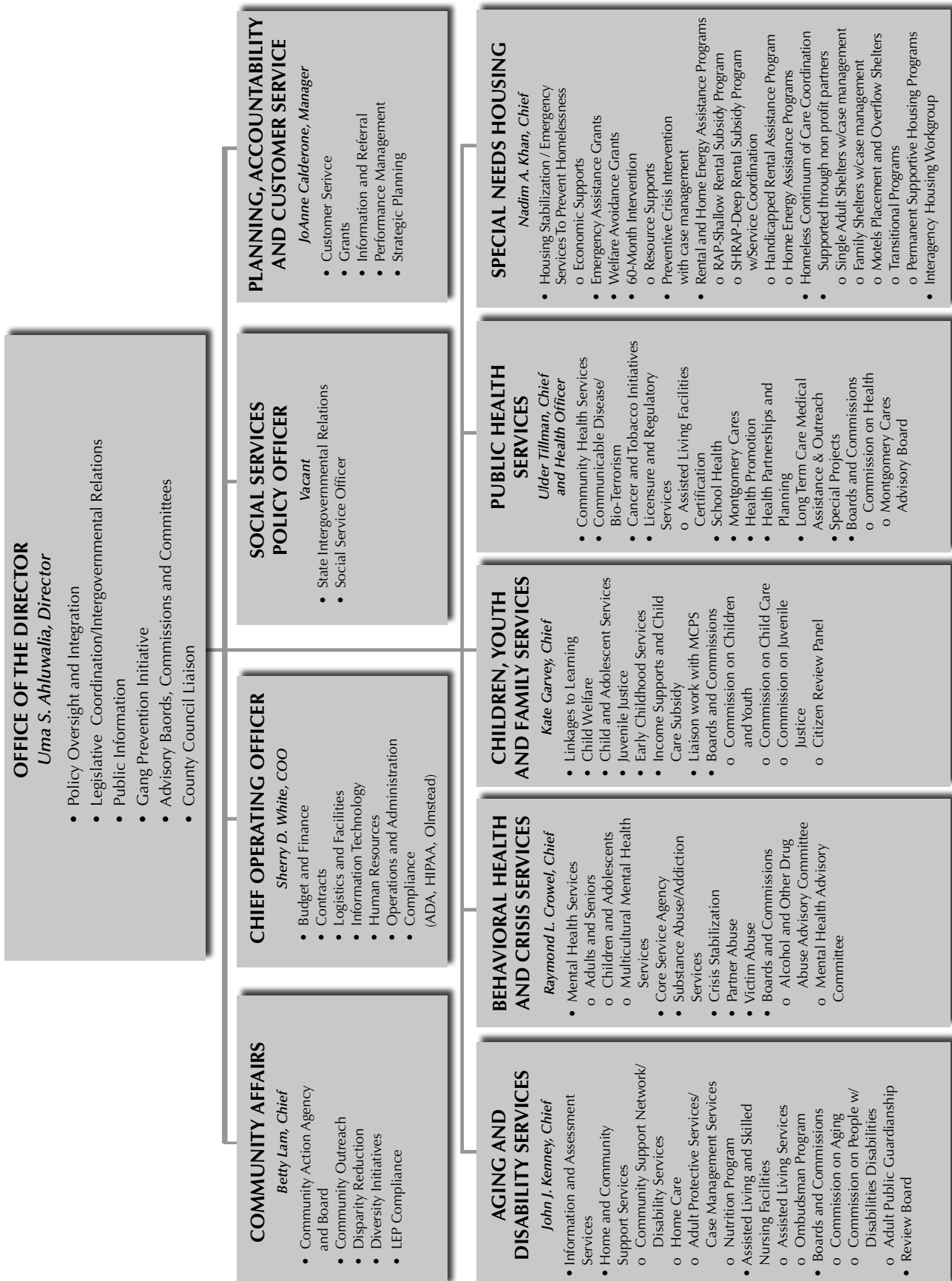
- Montgomery County moved to a Housing First Model in Fiscal Year 2008. The primary focus is to rapidly re-house individuals and families and address service needs once in permanent housing
- Utilized Housing First Model - households with income below 30 percent of the area median income (AMI).
 - o Served 222 households
 - o 203 currently housed
 - o Ninety-eight percent of the participants remained housed at least 12 months
- Over the last five years Montgomery County has significantly expanded its permanent housing inventory from 581 to 1339 beds.
- Two hundred ten families and 491 individuals were served in permanent housing in Fiscal Year 2010
- Permanent Supportive Housing is provided via County, HUD, local and private partnerships
- Montgomery County experienced a four percent decline in total homeless persons from 2008 to 2010.
- Compared to the rest of the Metropolitan Area Council of Governments (COG) region, we have one of the lowest rates of homelessness (1.1 homeless per thousand)
- Addressing the Federal strategic goal toward chronic homelessness, Montgomery County saw improvements from 2006 to 2010 with a 12 percent decline.

Special Needs Housing Services	FY08	FY09	FY10
Crisis Intervention			
Number of Applications	7,312	7,607	8,094
Number of Grants	5,911	6,890	6,402
Average Grant	\$504	\$629	\$635
Home Energy Assistance			
Number of Applications	9,044	10,435	12,315
Number of Grant Households	5,236	8,077	9,681
Rental Assistance			
Average Number of Households Receiving Subsidy per month	1,668	1,727	1,678
Emergency Shelter Services			
Single Adults Served	1,329	1,350	1,327
Families in Shelter	183	148	152
Motel Overflow	317	404	490
Total Number of Families Served in Shelter and Motels	500	552	642
Transitional Shelter			
Single Adults Served	365	371	388
Permanent Supportive Housing			
Families	155	186	210
Singles	366	362	491
Total Households	521	548	701
Housing Initiative Program			
Supportive Housing Rental Assistance	67	65	
Housing Initiative Program	0	72	214
Total	67	139	214

Trends/Issues

- There are 220 year round emergency shelter beds for individuals and families which are fully utilized. Seasonal shelter space for individuals increases capacity to 465 which is also fully utilized.
- Family shelter wait list averages 33 families monthly.
- County Rental Assistance applications increased 12 percent from FY08 to FY10. (From 3,216 to 3,607)
- Applications for Emergency Assistance rose 11 percent from FY08 to FY10. (From 7,312 to 8,094)
- An average seven percent of Montgomery County's homeless are veterans as compared to 26 percent nationally.
- Requests for assistance from the Energy Assistance Program increased 36 percent from FY08 to FY10 (9,044 in FY08 to 12,315 in FY10).
- Landlords continue to impose strict qualifications for prospective tenants with criminal backgrounds and poor credit histories.

Department of Health and Human Services - 2010 Organizational Overview



HHS At A Glance

Fiscal Year 2010 Budget\$269 million

Number of Employees1,609 Work Years

Fifty (50) programs offering services

More than 500 contracts for DHHS service needs

More than 100,000 clients served each year

Twenty-three major service locations (service also provided through 200 public schools)

HHS Boards and Commissions

Adult Public Guardianship Review Board

Alcohol & Other Drug Abuse Advisory Council

Board of Social Services

Citizens Review Panel Advisory Group

Collaboration Council on Children, Youth and Families

Commission on Aging

Commission on Child Care

Commission on Children and Youth

Commission on Health

Commission on Juvenile Justice

Commission on People with Disabilities

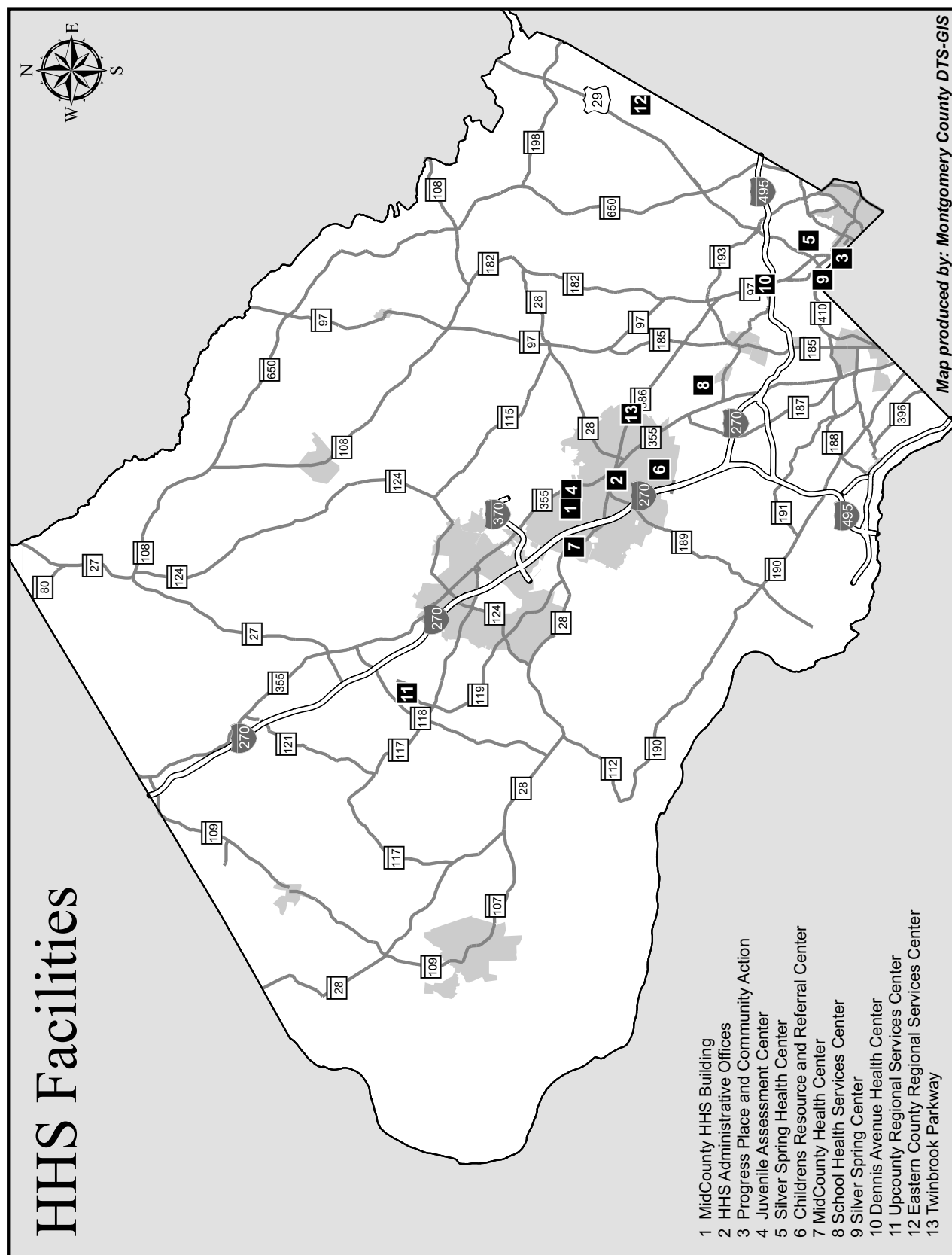
Commission on Veterans Affairs

Community Action Board

Mental Health Advisory Board

Montgomery Cares Advisory Board

Victim Services Advisory Board



Major Health and Human Service Locations

EAST COUNTY CENTER

3300 Briggs Chaney Road
Silver Spring, Maryland 20904

- Emergency Services
- Income Support
- Child Care Subsidy
- Immunization SEU
- Senior Assistance

Our Partners:

- Wellness Clinic – Holy Cross Hospital
- EMEA (Emergency Assistance)

UPCOUNTY GOVERNMENT CENTER

12900 Middlebrook Road
Germantown, Maryland 20874

- Housing Services-Prevention & Crisis
- Intervention
- Income Supports
- Maternity & Dental Clinic
- Child Welfare Services
- Community Health Center
- Service Eligibility Unit

CHILDREN, YOUTH & FAMILY SERVICES

51 Monroe Street, 17th Floor
Rockville, Maryland 20850

- Child & Adolescent Services
- Infants & Toddlers
- Linkages to Learning
- Child Welfare Services

CHILDREN'S RESOURCE AND REFERRAL CENTER

322 W. Edmonston Drive
Rockville, Maryland 20850

- Children's Resource Center
- Commission on Child Care
- Infants and Toddlers Program
- Child Care Referrals-LOCATE
- Health Consultation
- TECHNIC and Training

MIDCOUNTY HEALTH CENTER

1335 Piccard Drive
Rockville, Maryland 20850

- African-American Health Program
- Dental Services

- Development Evaluation Services for Children (DESC)
- Ombudsman for Health Care
- Service Eligibility Unit
- Juvenile Justice Services-Case Management
- Commission on Health
- Community Health Center

HHS ADMINISTRATIVE OFFICES

401 Hungerford Drive
Rockville, Maryland 20850

- Administrative Offices
- Aging and Disability Services
- School Health Services

MONTGOMERY COUNTY HEALTH AND HUMAN SERVICES

751 Twinbrook Parkway
Rockville, Maryland 20850

- Outpatient Addiction Services
- Adult Mental Health
- System Planning and Management Services

HHS SILVER SPRING CENTER

8818 Georgia Avenue
Silver Spring, Maryland 20910

- Child & Adolescent Mental Health Services
- Emergency Services
- Income Support Services
- Multicultural Program
- Resource Information Center

Our Partners:

- Ministries United for Silver Spring and Takoma Park (MUSST)

SILVER SPRING HEALTH CENTER

8630 Fenton Street
Silver Spring, Maryland 20910

- Child Welfare Services
- Dental Services
- Health Promotion
- Five-a-Day Nutrition Program
- Service Eligibility Unit
- Smoking Cessation Program
- Substance Abuse Program
- Community Health Center

*Service Locations, continued***AVERY ROAD CENTER**

14701-05 Avery Road
Rockville, Maryland 20853

- Residential Treatment
- Detoxification Services
- Halfway House

COLESVILLE CENTER

14015 New Hampshire Avenue
Silver Spring, Maryland 20904

Our Partners:

- Adult Dental Clinic
- MANNA Food Bank
- Colesville Child Care
- C-4 Clothes Closet

MIDCOUNTY DHHS BUILDING

1301 Piccard Drive
Rockville, Maryland 20850

- Abused Persons Program
- Child Welfare Services
- Hearing Clinic
- Income Support Program
- Maryland Energy Assistance Program
- Montgomery County Crisis Center
24 Hour Operation
- Rental Assistance Program
- Victim Assistance and Sexual Assault Program

CONSERVATION CORPS

12210 Georgia Avenue
Silver Spring, Maryland 20902
(Temporarily relocated to
14900 South Lawn Lane, Rockville)

- Training Center
- Corps Headquarters

DENNIS AVENUE HEALTH CENTER

2000 Dennis Avenue
Silver Spring, Maryland 20902

- Birth and Death Records
- Disease Control Services
- Foreign Travel Information
- HIV/AIDS Services
- Immunization Program
- Rabies Information
- Refugee Health Services
- Sexually Transmitted Disease Services
- Tuberculosis Control
- Supply Warehouse

PROGRESS PLACE

8210 Colonial Lane
Silver Spring, Maryland 20910

- Community Action Agency

Our Partners:

- Shepherd's Table
- Visions
- Community Clinic, Inc./
Community Vision

THE TESS CENTER

8513 Piney Branch Road
Silver Spring, Maryland 20910

- Abused Persons Program
- Health Counseling and Assistance
- Legal Aid Program

Our Partners:

- Health Choice Program
- Manna Food Distribution

JUVENILE ASSESSMENT CENTER

7300 Calhoun Place
Rockville, Maryland 20854

- Court Evaluation Services (CAFES)
- Child Welfare Services
- Juvenile Justice Services-Administration
- ChildLink
- Commission on Juvenile Justice
- Screening and Assessment Services for
Children and Adolescents (SASCA)

MID-COUNTY REGIONAL SERVICES CENTER

2424 Reddie Drive
Wheaton, Maryland 20902

- Women's Cancer Control
- Projecto Salud Health Clinic
- HHS Outreach Center
- Multicultural Mental Health

HOLIDAY PARK

3950 Ferrara Drive
Wheaton, Maryland 20906

- Latino Health Initiative

COMMUNITY SUPPORT NETWORK (A&D)

11 N. Washington Street, Suite 450
Rockville, Maryland 20850

- Community Support Network

LAWRENCE COURT CENTER

1 Lawrence Court
Rockville, Maryland 20850

- Addiction Services-Halfway House

Contact Information

Montgomery County Department of Health and Human Services

Administrative Offices

401 Hungerford Drive, 5th Floor
Rockville, Maryland 20850

Information and Assistance

Call 311
www.montgomerycountymd.gov/311

24 Hour Telephone and Walk In Crisis Center

240-777-4000

www.montgomerycountymd.gov/hhs

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